

needs of others. It is the way to ensure that Auschwitz, Buchenwald, and the other death camps are never repeated in other areas of the world.

COSPONSORSHIP OF S. 187

Mr. CORZINE. Mr. President, I ask unanimous consent that Senator FEINSTEIN be added as a cosponsor of S. 187, the Ensuring College Access for All Americans Act.

I would like to note for the RECORD that Senator FEINSTEIN should appear as an original cosponsor of S. 187. As a result of an administrative error by my office, she was not added to the bill when it was introduced.

CONFIRMATION OF MICHAEL O. LEAVITT TO BE SECRETARY OF HEALTH AND HUMAN SERVICES

Mrs. FEINSTEIN. Mr. President, I support the nomination of Governor Michael O. Leavitt to be U.S. Secretary of Health and Human Services.

Governor Leavitt has had a lengthy career in public service, having served most recently as the 10th Administrator of the United States Environmental Protection Agency.

In 1992, Leavitt was elected the 14th Governor of Utah and was that State's longest-serving Governor.

During his three terms as Utah's Governor, he was chosen by the Nation's Governors to represent States in working with Congress on welfare reform, Medicaid and children's health insurance. He chaired the National Governors Association, the Western Governors Association, the Republican Governors Association and Council of State Governments.

Governor Leavitt established an innovative welfare reform waiver program focused on increasing family income using an approach that emphasized employment and child support, but also addressed initial problems with families in need such as domestic violence, education, training, language barriers, and substance abuse issues to promote sustainable employment.

This year, the HHS Secretary will have the critical task of overseeing the implementation of the first ever drug benefit in Medicare as well as the implementation of several program reauthorizations such as Ryan White, Temporary Assistance for Needy Families, and the State Children's Health Insurance Program, all within an ever-constrained budgetary picture.

As someone who voted for the Medicare Modernization Act, it is my hope that Governor Leavitt will work with me to address some of the weaknesses of the bill in addition to ensuring that the more than 41 million Medicare beneficiaries know about this new benefit in Medicare and its low-income subsidies.

Of greatest concern to me is the cost of prescription drugs. In voting for the Medicare bill, I said on the Senate floor that one of the greatest weak-

nesses of the bill was that it not only did not do enough to control the rising cost of prescription drugs but it specifically prohibited the HHS from using the bulk purchasing power of the Federal Government to negotiate with prescription drug plans to lower drug prices for Medicare beneficiaries. I believe this prohibition should be stricken and that there should be a role for the HHS Secretary in what Medicare and beneficiaries pay for their drugs.

I am committed to working with the HHS Secretary to find real solutions for lowering drug costs for our Nation's seniors.

As the Medicare drug benefit is enacted, I am also hopeful that Governor Leavitt will work to ensure access to all needed medications for people living with HIV and AIDS, to allow for adequate transition time for the most vulnerable low-income seniors and to provide sufficient incentives and transparency for employers to retain their retirees' health care coverage.

Governor Leavitt will oversee the Department of Health and Human Services at a time of rising deficits and this will require tough decisions. But these decisions must be balanced with the needs of the millions of Americans, young and old, who rely on Medicare, Medicaid and SCHIP to provide their health care insurance.

Medicaid provides insurance to 40 million Americans, about 8 million of whom live in California. It covers 55 percent of all poor children and it pays for the births of one-third of all American children. It serves 50 percent of all people with AIDS and as many as 90 percent of children with AIDS.

Medicaid is the insurer of last resort. If Medicaid did not exist, these individuals and families would be uninsured.

But it is also the biggest budget items in many States. There is no question we can improve the efficiency and quality of Medicaid to ensure our dollars are being well-spent but we also cannot lose sight of the fact that increases in spending per enrollee from 2000 until 2003 were slower than increases in private insurance spending.

There are 45 million Americans without health insurance today. Arbitrary limits on Federal Medicaid spending will only increase the number of uninsured, driving up overall health care costs and burdening our nation's already overcrowded emergency rooms.

There is a great deal of work to be done, and I look forward to a productive working relationship with Governor Leavitt.

CONFIRMATION OF DR. CONDOLEEZZA RICE TO BE SECRETARY OF STATE OF THE UNITED STATES

Mr. ROCKEFELLER. Mr. President, I have followed closely both the confirmation hearing of Dr. Rice before the Foreign Relations Committee and the floor debate on her nomination. After considerable reflection, I have

decided to vote in favor of Dr. Rice's confirmation, although I must state for the record that I do so with some reservations.

I intend to support her nomination primarily because I believe the foreign policy of the United States must reflect a spirit of bipartisanship. Amidst the complex challenges that we face in the war on terrorism, this country cannot afford enduring divisions on international issues. We must return to common ground, not least so that the rest of the world recognizes our single purpose and our resolve. I should note, parenthetically, that restoring that lost unity depends equally upon the majority party, as upon my party.

Dr. Rice has the credentials to be Secretary of State. As National Security Adviser, she has proven an eloquent advocate for the administration's policies. At her confirmation hearing, she made clear our need for effective diplomatic engagement worldwide. I welcomed that emphasis. Perhaps most importantly, Dr. Rice has the President's utmost confidence—this will, I am certain, be an asset in her dealings with other nations, as well as in working with other agencies in our own Government.

My reservations about Dr. Rice stem not from doubts about her abilities, but rather from my concerns about her role in developing U.S. policy toward Iraq and in characterizing the threats posed by Iraq prior to the conflict. I have concluded that many of the administration's statements on Iraqi weapons, including those of Dr. Rice, were simply not underpinned by the intelligence available. That is troubling, as was Dr. Rice's failure, during the confirmation hearing, to acknowledge that mistakes were made, not only in the conduct of the war and its aftermath, but in the policies that led us into it.

This goes directly to the question of accuracy and accountability—whether this administration will take responsibility for its decisions and learn from the past, so as not to repeat the same errors in future. I believe that the decision to go to war in Iraq was wrong. Nevertheless, despite great skepticism among the American people about Iraq, President Bush was reelected. We must now go forward together to achieve stability in Iraq, to bring our forces home, and to restore American credibility at home and abroad.

The dubious decisions, not the nominee, concern me; however, I will not oppose Dr. Rice because I disagree with the administration's policies. That would not be conducive to the bipartisan foreign policy that I believe is crucial. Rather, I look forward to working with Dr. Rice to forge consensus on a more balanced approach to national security issues.

TARIFF RELIEF ASSISTANCE FOR DEVELOPING ECONOMIES ACT

Mrs. FEINSTEIN. Mr. President, I support legislation recently introduced